## INSTRUCTIONS FOR COMPLETING

DIHS Short Stay Unit (SSU) Evaluation Worksheet and Reporting Form DIHS QMD 007

This form can be used either as a data collection tool or as a reporting form. If you are using this form for a worksheet, simply circle the "Y" if the criteria were met or an "N" if the criteria are not met. If you are using this form as a reporting form, indicate the percent compliance of all the charts evaluated for each of the eight specific criteria.

The **A#** is the alien number of the detainee whose chart you are evaluating since they have been admitted to the SSU. The **Provider** is the provider overseeing the care of the patient while in the SSU. The **Encounter date** is that date the detainee was admitted to the SSU. **Diagnosis** is the diagnosis assigned to the detainee at the time of discharge.

## **CRITERIA**

- 1. This criterion is met only if the SSU admitting diagnosis **and** the reason for the admission are related in a logical manner.
- 2. This criterion is met only if the admitting history and physical exam are present in the chart, dated, and signed by the provider.
- 3. This criterion is met only if the nursing care plan is in the patient's chart, pertinent to the admitting diagnosis, and followed by the appropriate nurses taking care of the patient. The nursing notes need to reflect the nursing care plan.
- 4. This criterion is met only if the vital signs are recorded on the vital sign sheet as ordered by the provider. If there is no documentation indicating the frequency of vital signs, then the vital signs need to be recorded on the vital sign sheet at least once per shift. Regardless of whether an order is in the chart for vital signs, the vital signs have to be recorded at a minimum of at least once per shift.
- 5. This criterion is met only if the treatment being given to the patient while in the SSU is appropriate for the working diagnosis while the patient is under care. If the diagnosis of the patient changes while in the SSU, the treatment should change appropriately.
- 6. This criterion is met only if **both** of the following are met: 1) the existence of a daily progress note by the provider caring for the patient in the SSU, and 2) the patient's response to the prescribed therapy is clearly documented in the daily progress note. If only one of the above is available, then this criterion is not met.
- 7. This criterion is met only if discharge planning, patient education and post-discharge follow-up are clearly documented in the patient's chart. If any of the three items above are missing from the documentation then this criterion is not met.

8. This criterion is met only if the treatment outcome of the patient was expected.

**Threshold**: Here is where you would put the threshold that you are placing on your criteria. For the most part the threshold should always be 100%. However there are those times when you might set a lower particular threshold and it would be here that you would document this and to which criteria it pertains.

**Percent compliance with all criteria**: Here is where you would document your overall compliance with all eight of the criteria in all the charts that you evaluated. For example, if you set your threshold to be 100%, and you are 100% on all eight criteria, then your over all compliance with all the criteria is 100%.